

## United States Office of Government Ethics \*\*REGISTRATION FORM\*\* Intermediate Post Employment Washington, DC

Registrant's Name:	
Agency: Phone: ( )	
FAX No.: ( )	
<del>, ,</del>	
Please select ONE course date on Post Employment:	
	00 a.m 12:00 noon 00 a.m 12:00 noon
LOCATION: Department of Labor Conference Ctr C-5521 (5th Flr) - Sem Rm 4 (Jan. 26) Conference Ctr C-5320 (5th Flr) - Sem Rm 6 (Feb. 4) 200 Constitution Avenue, NW. (Metro Stop: Judiciary Square) Washington, DC 20201 202-219-7773	
PLEASE FAX THIS FORM TO: Sheila Powers, 202-208-8039	
<b>REGISTRATION DEADLINE:</b> <u>January 21, 1999</u> . If you must cancel please contact Sheila Powers, OGE Event Coordinator at 202-208-8000, ext. 1104.	
PARTICIPANT INFORMATION (check appropriate items):	
JOB SERIES: ( ) Attorney ( ) Personne	l () Mgmt Analyst () Other:
ETHICS RESPONSIBILITIES:  ( ) Written Opinions/Counseling ( ) Training ( ) Evaluation of ethics program	( ) Financial disclosure process ( ) Administrative actions ( ) Agency reports to OGE
LENGTH OF TIME IN ETHICS AREA: years PER	CENT OF TIME SPENT IN ETHICS AREA:%
FOR OGE U	JSE ONLY_
	■ NO (Sorry, class full)
(OGE Official) SIGNATURE:	DATE: